Paa

| 10/5/12 | (Column 1) | 5200 | vmn 2) | SMALL E | YIMY. | QR | OTHER | THAN |
|--|---------------------|--------------|-----------------|------------------|---------------|------|--------------------|-----------------|
| TOTAL CLEAIMS | | | | RATE | FEE | 1 | RATE | FEE |
| FOR . | MAKER FLED | 7 1900 | SER EXTRA | BASIC FEE 370.00 | | OR | EASIC FEE | 740.00 |
| TOTAL CHARGEABLE CLAIMS | 4 minus 10 | | | X8.9= | | OR | X\$18= | |
| HOEPENDENT CLAIMS | | • | | X42:: | | | X84= | · |
| MULTIPLE DEPENDENT CLAIM P | RESENT | | | | | OR | | |
| If the difference in column 1 is | loce than seen, ent | or W in | mb mo 2 | +140a | | OR | •280= | |
| 1 , | | - | CONTROL S | TOTAL | | OR | TOTAL | |
| 2206 (Cotumn 1) | MENDED - PA | KT II | (Column 3) | SMALL | PATITY | OR | OTHER SMALL | |
| | THE PARTY NAMED IN | MEST | 1-2-7-7-7 | | ADDI- | Ĭ | 1777 | ADDL |
| AFTER AMERICALENT | PRE | MOUSLY DAGS | PRESENT | RATE | TIONAL | | PATE | TIONAL |
| REMANDING AFTER AMERICANETT Total Independent Total | Mires - | 0 | 1.8 | 25 | 200 | OR | X\$18= | |
| Independent • 4 | Minus | 824 | • # | 180 | <u>~</u> | OR | X84- | |
| FIRST PRESENTATION OF M | ULTIPLE DEPENDE | NT CLAIM | | 1100 | | | | |
| and and | | | | 1140= | 100 | OR | •260- | |
| 07/17/0 Carron 1) | | | | ADDIT, FEE | 200 | OR, | NODIT. PEE | |
| CLANG | 148 | umn 2] | (Column 3) | | ADD- | | | 455 |
| REMADING AFTER AMENDMENT | PRE | MOUSLY | PRESENT | RATE | TIONAL | | RATE | ADDI- TIONAL |
| REMADENG AFTER AMENDMENT Total & 355 Independent | itinus en | DFQA | .2 | 1 | - 13 | | £5() | AFER VICE |
| Independent | Minus ese | 4 | [20] | 凝 | 130 | OR | ASHUS ANA | 100 |
| FIRST PRESENTATION OF M | LUPLE CEPENCE | TOUR | | 77725 | -6.5 | OR | A CO | 700 |
| | • | | | +1465 | : | OR | -290× | |
| abula | | | | ADDIT FEE | 7 | OR | TOTAL MOOT, FEE | 500 |
| (Cotumn 1) | | umn 2) | (Cotumn 3) | | | | | |
| REMARKS | NO | MBER MBER | PRESENT | | ADDI | | | ADDI- |
| AFTER AMBONENT | | ACUELY • | EMRA | RATE | TIONAL FEE | | RATE | TIONAL |
| REMADURO AFTER AMENOMENT Total Independent | Mires es | 30. | • 🙆 | X\$ 9= | | œ. | X\$18= | |
| | Minus ess | 6 | ·() | X42- | | | X84= | 7 |
| FIRST PRESENTATION OF M | ATPLE DEPENDE | VTCLAIM | | | | OR | - | (|
| * If the entry is column 1 is less than the entry in column 2, write '0' in column 2. | | | | +140- | | OR | +280= | لح |
| "If the "Aginest Number Previously Paid For" IN 1768 SPACE is been then 20, enter "20" "If the "Aginest Number Previously Paid For" IN 1768 SPACE is been then 2, enter "20" The "Aginest Number Previously Paid For" (Rend or Independent) is the highest number it | | | | ADDIT FEE | | OR . | LOIST | 0 |

Effective December 8, 2004 CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE ___ TOTAL CLAIMS OR SMALL ENTITY RATE FEE RATE FEE FOR NUMBER FILED NUMBER EXTRA BASIC FEE 150.00 BASIC FEE OR 300.00 TOTAL CHARGEABLE CLAIMS minus 20= X\$ 25= X\$50= OR. INDEPENDENT CLAIMS minus 3 = X100= MULTIPLE DEPENDENT CLAIM PRESENT X200= +180± If the difference in column 1 is less than zero, enter 10° in column 2. OR +360= TOTAL TOTAL OR CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY OR CLAIMS HIGHEST REMAINING ADDI-AMENDMENT NUMBER PRESENT ADDI-AFTER **PREVIOUSLY** RATE TIONAL **EXTRA** RATE AMENDMENT TIONAL PAID FOR FEE FEE Total Minus X\$ 25= X\$50= ΟÀ Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100= X200≈ +180= OR +360= TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST 8 REMAINING NUMBER ADDI-PRESENT ADDI-AFTER PREVIOUSLY RATE TIONAL AMENDMENT RATE TIONAL PAID FOR FEE FEE Total Minus X\$ 25=X\$50= OR Independent Minus FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100= X200= OR +180= OR +360= TOTAL TOTAL ADDIT. FEE ADDIT, FEE (Column 1) (Column 2) (Column 3). CLAIMS HIGHEST REMAINING NUMBER ADDI-PRESENT ADDI: AFTER PREVIOUSLY **EXTRA** RATE TIONAL RATE TIONAL AMENDMENT PÀID FOR FEE. FEE Total Minus X\$-25= X\$50*≡* OR Independent Minus **=**. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM X100= X200= OR +180= +360= • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. OR * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL TOTAL ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT, FEE ADDIT, FEE The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1. FORM PTO-875 (Rev. 10/04) Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number